**Document B: Readability and Suitability Checklist for Written Health Education Materials**

Title of Material: [ ]

Main Topic: [ ]

Target Audience: [ ]

Developed by: [ ]

Date Brochure: [ ] Developed  [ ] Adapted [ ] Revised  [ ] Reviewed:

Format of Material: [ ] Flyer  [ ] Brochure  [ ] Booklet  [ ] Poster  [ ] Other:

This material is exempt from review and does not require the Checklist. (See Document B)

☐ Yes, describe why: [ ]  ☐ No

**A. CONTENT REQUIREMENTS**

1. Non-clinical content is accurate and up-to-date:
   - Somewhat Not Met  Met1  Met2  Met3  NA

2. Number of concepts/messages is limited to 2-3 per page:
   - Somewhat Not Met  Met1  Met2  Met3  NA

3. Sentences are simple:
   - Somewhat Not Met  Met1  Met2  Met3  NA

4. Technical terms are defined:
   - Somewhat Not Met  Met1  Met2  Met3  NA

5. Material is written in an active voice:
   - Somewhat Not Met  Met1  Met2  Met3  NA

6. Meets 6th grade reading level requirement:
   - Reading Level: [ ]
   - Method used: [ ] Flesh Reading  [ ] Fry  [ ] Gunning Fog  [ ] SMOG  [ ] Other:
   - Somewhat Not Met  Met1  Met2  Met3  NA

7. Material does not use the word “free” in reference to cost sharing:
   - Somewhat Not Met  Met1  Met2  Met3  NA

8. Focuses on specific actions (behaviors):
   - Somewhat Not Met  Met1  Met2  Met3  NA

**B. LAYOUT REQUIREMENTS**

1. Blocks of text are in Serif font and are ≥ 12 point for general audiences or ≥ 14 point for seniors or persons with impaired vision:
   - Somewhat Not Met  Met1  Met2  Met3  NA

2. All capital letters are used only for headings, subheadings, and content emphasis, and when grammatically correct:
   - Somewhat Not Met  Met1  Met2  Met3  NA

3. There is adequate white space (~30%):
   - Somewhat Not Met  Met1  Met2  Met3  NA

4. The layout guides the reader with headings, bullets/numbers, font formatting and size:
   - Somewhat Not Met  Met1  Met2  Met3  NA

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1 A provision is **met** when 85-100% of the material being assessed meets the expected standards or specific criteria.
2 A provision is **somewhat met** when 65-84% of the material being assessed meets the expected standards or specific criteria.
3 A provision is **not met** when 0-64% of the material being assessed meets the expected standards or specific criteria.
5. Main points, phone numbers, and program names are emphasized using bold, boxes, or increased font size: □ □ □ □

6. There is appropriate contrast between the print and background colors: □ □ □ □

C. VISUAL REQUIREMENTS

1. Visuals are relevant to the accompanying text: □ □ □ □

2. Visuals are simple and uncluttered: □ □ □ □

3. People or equivalent visual presentation of people and activities are representative of the intended audience: □ □ □ □

D. CULTURAL APPROPRIATENESS REQUIREMENTS

1. Visuals are culturally appropriate for the intended audience (material is not offensive, does not reinforce stereotypes, and is inclusive in representation): □ □ □ □

2. Content is culturally appropriate for the intended audience (provides culturally meaningful information such as “how to” advice and examples): □ □ □ □

3. Topic-specific cultural relevance is reflected where applicable (such as food and exercise habits of the intended audience): □ □ □ □

4. Materials created by the MCP are available in alternative formats upon request: □ □ □ □

E. FIELD-TESTING

MCP qualified health educator determines if field-testing is needed for this material.

1. Was this material field-tested? □ Yes □ No, Explain why: □
   Month/Year material was field-tested: □

2. Type of field-testing conducted: □ Focus Groups □ Individual Member Interviews
   □ Community Advisory Committee (CAC) Review □ Other: □

3. Total # of participants in focus groups, interviews, or CAC: □

4. Description of participants (ethnicity, language spoken, disabilities, etc.): □

5. Summary of field-testing results: □
F. MEDICAL CONTENT REVIEW

MCP qualified health educator determines if material requires clinical review to verify medical accuracy. If not required, check N/A.

1. Clinical content is medically accurate:
   - [ ] Met
   - [ ] Somewhat Met
   - [ ] Not Met
   - [ ] NA

2. Clinical content is up-to-date:
   - [ ] Met
   - [ ] Somewhat Met
   - [ ] Not Met
   - [ ] NA

3. Primary Medical Content Reviewer or Medical Review Committee:
   - [ ] Physician
   - [ ] NP/PA/RN
   - [ ] Pharmacist
   - [ ] Other:

G. TRANSLATED/NON-ENGLISH MATERIALS

Keep translation documentation on file for auditing purposes.

This material is available in the following languages (in addition to English):

- [ ] Arabic
- [ ] Armenian
- [ ] Chinese
- [ ] Farsi
- [ ] Hmong
- [ ] Khmer
- [ ] Korean
- [ ] Russia
- [ ] Spanish
- [ ] Tagalog
- [ ] Vietnamese
- [ ] Other (specify):

Translation was reviewed by at least one other person who knows the language, besides the translator:  
- [ ] Yes
- [ ] No

H. QUALIFIED HEALTH EDUCATOR’S SIGNATURE

Material must be reviewed for readability and suitability standards at least every 5 years.

- [ ] Initial Review
- [ ] Subsequent (5-Year) Review

Material Review and Certification

- [ ] Approved: If any provisions are marked “somewhat met” and/or “not met”, justify why the document was approved. (e.g. there was just 1 “not met” provision and one “somewhat met” provision, and all the other provisions were met; there is little information on the topic, and it sufficiently captures the main points needed on the topic, despite an 11-point font, etc.):

- [ ] Not Approved

My signature below certifies that this material was reviewed, as stated, and if approved, meets DHCS criteria.

Print Name:  
Title:  
Signature:  
Date:

DHCS Health Education Consultant (For MCPs without a qualified health educator):

Print Name:  
Signature:  
Date: